Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form For Official Use Only Division, Department, or Region (if applicable) District 3

Designated Agency Contact (Name, Title) Patricia Cya Area Code/Phone Number Amendment (Must Provide Explanation in Part 3.) patricio. Ceja & Sanjoseca: ga Date of Original Filing: \_ 408-535-4929 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ . Does the agency have a ticket policy? Yes Ø No □ Date(s) 3 **Event Description:** Ticket(s)/Pass(es) provided by agency? Yes No 🗹 Was ticket distribution made at the behest Yes ☑ No ☐ Official's Name (Last, First) of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other  $\square$ Income \_\_ If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other  $\square$ Income  $\square$ If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) **Passes** 16 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Comment:

Agency Report of: